



Application for Federal Employment

1. Last Name																													
<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms.																													
First Name										Middle Name										2. Date of Birth [mmddyy]									
3. Other Names Ever Used [maiden, nicknames, etc.]															4. Social Security Number														
5. Permanent Street Address [include apartment number, if any] Omit all punctuation marks																													
City										State					ZIP/Postal Code (Start at left block & include dash with ZIP+4)														
Country (If not the United States)										6. Home Phone [include Area Code]					7. Work Phone [include Area Code]														
8. Indicate Title, Position or Program you are applying for.																													
10. Are you available for: (Select all appropriate)										11. Are you a U. S. Citizen? <input checked="" type="radio"/> Y <input type="radio"/> N					12. If you are a male born after December 31, 1959, have you registered with the Selective Service? <input checked="" type="radio"/> Y <input type="radio"/> N					13. Veterans' Preference									
<input type="radio"/> Full-Time? <input type="radio"/> Shift Work? <input type="radio"/> Temporary/Part-Time? <input type="radio"/> Flexible Work Schedule? <input type="radio"/> Overtime? <input type="radio"/> World Wide Assignment?										Is your spouse/cohabitant a U. S. Citizen? <input checked="" type="radio"/> Y <input type="radio"/> N If "NO", enter the country of his/her citizenship.										<input type="radio"/> No Preference <input type="radio"/> 5-Point Preference <input type="radio"/> 10-Point Preference									
14. Were you ever employed as a civilian by the Federal Government? If "YES" mark all that apply. <input checked="" type="radio"/> Y <input type="radio"/> N										15. Do you have a relative working for the agency for which you are applying? If "YES", give details on Page C. <input checked="" type="radio"/> Y <input type="radio"/> N					16. Highest Education Level Completed					17. Current Student Status									
<input type="radio"/> Temporary <input type="radio"/> Career-Conditional <input type="radio"/> Career <input type="radio"/> Excepted Do you receive, or have you ever applied for retirement pay, pension or other pay based on military, Federal civilian, or District of Columbia Government service? <input checked="" type="radio"/> Y <input type="radio"/> N															<input type="radio"/> 10 <input type="radio"/> College: 2 <input type="radio"/> Graduate Studies <input type="radio"/> 11 <input type="radio"/> College: AA <input type="radio"/> Masters <input type="radio"/> 12/GED <input type="radio"/> College: 3 <input type="radio"/> Professional Degree <input type="radio"/> Vo/Tech Prog. <input type="radio"/> College: 4 <input type="radio"/> JD/other law degree <input type="radio"/> College: 1 <input type="radio"/> College: BA/BS <input type="radio"/> Doctorate					<input type="radio"/> Full-Time Student <input type="radio"/> Part-Time Student <input type="radio"/> Not a Student									
18. High School Name										City, State, ZIP Code					Date of Diploma/GED[mmyy]														
19. Undergraduate Institution										Date of Degree[mmyy]					19. Graduate Institution					Date of Degree[mmyy]									
City, State, Zip Code, Country (If not U.S.)										Grade Point Avg. (on 4.0 scale)					City, State, Zip Code, Country (If not U.S.)					Grade Point Avg. (on 4.0 scale)									
Major					Minor					Number of credit hours completed					Major					Minor					Number of credit hours completed				
Date From [mmddyy]					Date To [mmddyy]					<input type="radio"/> Quarter <input type="radio"/> Semester					Date From [mmddyy]					Date To [mmddyy]					<input type="radio"/> Quarter <input type="radio"/> Semester				
21. Do you have or have you had a Security Clearance? <input checked="" type="radio"/> Y <input type="radio"/> N										22. First Foreign Language Proficiency					Second Foreign Language Proficiency														
If "YES", what type of clearance and who issued the clearance?																													
										Speaking Proficiency					Reading Proficiency					Speaking Proficiency					Reading Proficiency				
										S					R					S					R				
23. List any special skills (e.g. computer), experiences, current licenses, honors, awards, special accomplishments and/or training (with date completed) relating to the position for which you are applying. Continue on Page C, if necessary.										24. Original Signature [SIGN IN INK] I certify that all of the information on and attached to this application is true, correct, complete, and made in good faith.																			
25. Date Signed [mmddyy]																													